## **Inland Empire Valley Flute Society Membership Form**

Name (include Title, if appropria	ate)			
Business/Ensemble Name (If Bu	siness/Ensemble N	⁄lemb	pership)	
Mailing Address				
City	State		Zip	
E-mail address				
Telephone				
Website Address (for Business/I	Ensemble/Teacher	men	nbers)	
description, etc.)			sional, student, type of business,	
Are you interested in helping wi	th IEVFS programs	or a	ctivities? If yes, please note your	interests/skills.
Would you be willing to Chair or	help with an offic	:e?		
What activities, presentations, or	or programs are yo	u int	erested in?	
Please indicate Membership typ	e for this year by o	check	ring the appropriate box(es).	
☐ \$15 Student N	1embership*		\$40 Teacher Membership	
☐ \$30 General N	1embership		\$75 Business Membership	
☐ \$30 Ensemble	Membership			
* Available to elementary, midd	dle school, high sch	nool,	and college students.	
•			fund? We are raising money for fthe cost of a student's private le	
Membership Dues:	\$		_	
Optional Donation For Scholars	hip Fund: \$			
TOTAL ENCLOSED:	\$			

## **Instructions:**

- <u>If paying by check</u>, mail this form and your check to Inland Empire Valley Flute Society, P.O. Box 7784, Redlands, CA 92375.
- <u>If paying by Zelle</u>, email this form to <u>IEVFluteSociety@gmail.com</u>. Zelle payment should be directed to <u>IEVFluteSociety@gmail.com</u>.